

**Form 641 – Parts A, B & C**

**ASHNHA Quarterly Project Budget Summary  
& Performance Analysis Reporting Form**

**For All 2009 Denali Commission Approved Projects –  
Projects No. 1150 – A through G**

Project Name: Pyxis Machines

Name of Hospital / Grant Recipient: Norton Sound Health Corporation

Reporting Period: ***January 1, 2010 through March 31, 2010***

Grant No.: 01150-C

**641-A. Project Budget Summary** (provide the following information; use additional pages as necessary):

**1. Original Project Budget Information:**

- a. The *original total* approved project budget:
  - i. Amount of Denali Commission Grant Award: \$185,140
  - ii. Amount of Facility Cost Share Match (CSM): \$185,141
  - iii. Original Total Project Cost [line 1(a)(i) plus line 1(a)(ii)]: \$370,281

**2. Actual Project Costs Recorded During the Current Reporting Period:**

- a. Amount of the Facility's own Project CSM Expended (non-reimbursed expenditures) during the current reporting period: **\$186,415**
- b. Amount of Facility funds expended during the current reporting period for which Denali Commission grant funds are being requested this period on Form 642 to reimburse your hospital for its project expenditures: **\$87,690**
- c. Total amount of project costs recorded during the reporting period, whether expended facility CSM or reimbursement for facility expenditures is being sought (add lines 2a & 2b):  
**\$274,105**

**3. Total Denali Commission Grant Funds Received to Date:**

Please report the **total** amount of Denali Commission grant funds **received** (whether received as an advance or as reimbursement for expenses) as of the end of the current reporting period (i.e., the total grant funds received to-date): **\$0**

**4. Total Facility Cost Share Match Funds Expended to Date:**

Please report the **total** amount of hospital funds **expended** (i.e., the hospital's share of the cost of the project for which reimbursement was not and cannot be sought from the Denali Commission) as of the end of the current reporting period (i.e., the total hospital matching funds expended to-date for which you did not seek reimbursement):

**\$186,415**

## **2. Project Schedule:**

Please state the anticipated start and end dates of this funded 2008 Denali Commission Primary Care in Hospitals project, and provide a list appropriate milestone dates for the major phases or activities of your project.

Start date: September 2009

End date: March 2010

Description of Milestone Or Activity	Anticipated Completion Date
Order Cardinal Health Pyxis System	09/30/09
Pyxis Units Arrived on site at NSHC	10/31/09
Pyxis representative made site visit	11/05/09
Pyxis unit implementation and training	12/08/09
Pyxis Medication dispensing "Go Live" Date	12/15/09
Final Invoicing (Once System is Fully Implemented) We need to exchange 2 units and replace which slowed invoicing	01/31/10
Final Payment delayed- working to troubleshoot interface between Meditech and Pyxis.	approx 6/1/10

**641-B. Project Performance Analysis** (add line items to the chart as appropriate):

2009 Project Budget Line Items:	Approved Budget:	Actual Cost:	Scheduled Completion Date:	Actual Work Performed:
Pyxis Equipment	370,281	371,555	1/31/10	Units installed and fully operational for medications, supply side is still underway.
<b>Totals:</b>	370,281	371,555		

**641-C. Facility Certification:**

The preparer of this report, by signing below, certifies on behalf of his or her employer that the information contained herein is accurate and complete to the best of his or her knowledge.

  
Signature

7/26/2010  
Date

Roy Agloing, Chief Administration Officer  
Printed Name and Official Title

Form 642

**ASHNHA's Quarterly Reporting Form  
Covering 2008 Denali Commission Projects  
Numbered 1005 – A through G**

*Please Use this Form to File Your Facility's Quarterly Narrative Progress Report  
And /Or Make a Fund Disbursement Request*

Project Name: Pyxis Medication and Supply Dispensing

Hospital: Norton Sound Health Corporation

Reporting Period: **January 1, 2010 through March 31, 2010**

Denali Commission Grant No.: 1005 - c

**A. Project Narrative** (use additional pages as necessary):

1. What is the status of your 2009 "Primary Care in Hospitals" project as of March 31, 2010?  
(Please list all project phases completed or milestones achieved during the report period.)

**The Pyxis Medication is fully operational. NSHC is still working to implement the "supply" side of Pyxis. NSHC is still working to capture all charges through the meditech system. Payments have been made. The final payment will be submitted once all equipment is fully functional.**

2. Is your 2009 project on schedule? If not, what kind of problem(s) does the delay present?  
How will this be dealt with? Will the delay potentially extend the project beyond 9/30/2011?

**This project is on schedule and all equipment has been purchased, but the final payment will not be made until the company and Meditech troubleshoot the connection to enable the charges to occur.**

3. Is the 2009 project on budget, or over or under budget? If over budget, how will this be dealt with? What funds is your facility using to cover the additional project costs?

**The project is anticipated to exceed budget by \$1,274 which will be paid out of operations.**

4. Other comments, problems and solutions:

**B. Project Fund Disbursement Request**

We are requesting ASHNHA to release \$ 87,690.00 in Denali Commission Grant Funds for our project at this time. *This funding request is either:*

1. / a request for an Advance against Commission Project Grant Award Funds; **or**

2. ☒ a request for Reimbursement from Project Grant Award Funds in order to cover project expenses incurred by our hospital during the reporting period.

(Copies of all invoices submitted and checks written in payment must accompany any request for reimbursement; copies of purchase orders or other commitment documents must accompany any request for an advance).

RUN DATE: 04/25/10 NORTON SOUND HEALTH CORPORATION MATERIALS MANAGEMENT \*LIVE\*  
 RUN TIME: 1700 PO INQUIRY  
 RUN USER: ADMIN CB

PURCH FAC: SYSTEM  
 PO NUMBER: 053908 STATUS: BACKORDER  
 PO TYPE: PURCHASE BUYER: MM MM  
 RETURN FOR PO: SHIP VIA:  
 INVENTORY: 1ST RCPT: 01/27/10  
 ORDER TYPE: REGULAR  
 # CYCLES:  
 ORDERED: 06/24/09  
 CONFIRMED: 06/24/09  
 VERIFIED: 06/24/09  
 DELIVERY: 08/31/09  
 COMPLETED:  
 PRINTED: 02/11/10  
 LAST:  
 VENDOR: 0116627 CAREFUSION SOLUTIONS, LLC  
 TERMS: INV NET 30  
 EDI PGM:  
 CDS: PO - PURCHASE ORDER

LINE	ITEM #	DESCRIPTION	DEPT/INVEN	ORDER	RCV	CAN	LEFT UP	COST/UP
			G/L ACCOUNT		PURCH REQ			
1	0065618	MEDSTATION 4000Rx PROFILE						
	27050			1	1	0	0 EA	<del>26449.0000</del>
	27050801							
	06/24/09	MM MM	ORDER	1	@26449.0000			
	01/27/10	MM MM	REC	1	EA	PL# 1/26/10		
2	0065619	CII SAFE DOUBLE COLUMN						
	27050			1	1	0	0 EA	<del>50302.0000</del>
	27050801							
	06/24/09	MM MM	ORDER	1	@50302.0000			
	01/27/10	MM MM	REC	1	EA	PL# 1/26/10		
3	0065620	SUPPLY CENTER 9x CONSOLE						
	27050			1	0	0	1 EA	14938.0000
	27050801							
	06/24/09	MM MM	ORDER	1	@14938.0000			
4	0065621	MEDSTATION 4000Rx PROFILE 6 DR						
	27050			2	2	0	0 EA	<del>52189.0000</del>
	27050801							
	06/24/09	MM MM	ORDER	1	@52189.0000			
	06/25/09	MM MM	ORD FROM	1	@52189.0000			
			TO	2	@52189.0000			
	01/27/10	MM MM	REC	2	EA	PL# 1/26/10		
5	0065622	MEDSTATION 4000 7 DR.AUXILLARY						
	27050			1	1	0	0 EA	<del>31693.0000</del>
	27050801							
	06/24/09	MM MM	ORDER	1	@31693.0000			
	01/27/10	MM MM	REC	1	EA	PL# 1/26/10		
6	0065623	PARASSIST HANDHELD (ONE)						
	27050			1	0	0	1 EA	8563.0000
	27050801							
	06/24/09	MM MM	ORDER	1	@8563.0000			
7	0065624	1-PORT ETHERNET CRADLE INCL.						
	27050			1	0	0	1 EA	525.0000
	27050801							

RUN DATE: 04/25/10 NORTON SOUND HEALTH CORPORATION MATERIALS MANAGEMENT \*LIVE\*  
 RUN TIME: 1700 PO INQUIRY  
 RUN USER: ADMIN CB

PURCH FAC: SYSTEM  
 PO NUMBER: 053908 STATUS: BACKORDER ORDERED: 06/24/09  
 PO TYPE: PURCHASE BUYER: MM MM CONFIRMED: 06/24/09  
 RETURN FOR PO: SHIP VIA: VERIFIED: 06/24/09  
 INVENTORY: 1ST RCPT: 01/27/10 DELIVERY: 08/31/09  
 ORDER TYPE: REGULAR COMPLETED:  
 # CYCLES: PRINTED: 02/11/10  
 VENDOR: 0116627 CAREFUSION SOLUTIONS, LLC  
 TERMS: INV NET 30 LAST:  
 EDI PGM:  
 CDS: PO - PURCHASE ORDER

06/24/09 MM MM	ORDER	1 @525.0000			
8 0065625	SUPPLY STATION vs9 X dbl col.				
27050	1	0	0	1 EA	20561.0000
27050801					
06/24/09 MM MM	ORDER	1 @20561.0000			
9 0065626	MEDSTATION 4000 NON PROFILE				
27050	1	1	0	0 EA	<del>40759.0000</del>
27050801					
06/24/09 MM MM	ORDER	1 @40759.0000			
01/27/10 MM MM	REC	1 EA	PL# 1/26/10		
10 0065627	MEDSTATION 4000 4 Dr. AUXILLARY				
27050	2	2	0	0 EA	<del>9503.0000</del>
27050801					x 2
06/24/09 MM MM	ORDER	2 @9503.0000			
01/27/10 MM MM	REC	2 EA	PL# 1/26/10		= 19,006
11 0065628	MEDSTATION 4000 NON PROFILE				
27050	0	0	0	0 EA	17820.0000
27050801					
06/24/09 MM MM	ORDER	1 @17820.0000			
06/26/09 MM MM	ORD FROM 1 @17820.0000				
	TO 0 @17820.0000				
06/26/09 MM MM	ORD FROM 0 @17820.0000				
	TO 1 @17820.0000				
10/26/09 MM MM	ORD FROM 1 @17820.0000				
	TO 0 @17820.0000				
12 0065629	MEDSTATION 4000Rx PROFILE 2 dr				
27050	1	0	1	0 EA	0.0000
27050801					
06/24/09 MM MM	ORDER	1 @52189.0000			
06/25/09 MM MM	CAN	1 EA			
	SEE LINE 4 DUPLICATE ENTRY				
06/26/09 MM MM	ADJ FROM 0 @52189.0000				
	TO 0 @0.0000				
13 0065630	MEDSTATION 4000 7 dr AUXILLARY				
27050	0	0	0	0 EA	22973.0000
27050801					
06/24/09 MM MM	ORDER	1 @22973.0000			
10/26/09 MM MM	ORD FROM 1 @22973.0000				

RUN DATE: 04/25/10 NORTON SOUND HEALTH CORPORATION MATERIALS MANAGEMENT \*LIVE\*  
 RUN TIME: 1700 PO INQUIRY  
 RUN USER: ADMIN CB

PURCH FAC: SYSTEM  
 PO NUMBER: 053908 STATUS: BACKORDER ORDERED: 06/24/09  
 PO TYPE: PURCHASE BUYER: MM MM CONFIRMED: 06/24/09  
 RETURN FOR PO: SHIP VIA: VERIFIED: 06/24/09  
 INVENTORY: 1ST RCPT: 01/27/10 DELIVERY: 08/31/09  
 ORDER TYPE: REGULAR COMPLETED:  
 # CYCLES: PRINTED: 02/11/10  
 VENDOR: 0116627 CAREFUSION SOLUTIONS, LLC  
 TERMS: INV NET 30 LAST:  
 EDI PGM:  
 CDS: PO - PURCHASE ORDER

TO 0 @22973.0000

14	0065631	SUPPORT FOR FIRST 12 MONTHS					
	27050	1	1	0	0 EA	12624.0000	
	27050801						
	06/24/09	MM MM	ORDER	1 @13584.0000			
	10/26/09	MM MM	ADJ FROM	1 @13584.0000			
				TO 1 @12624.0000			
	01/27/10	MM MM	REC	1 EA	PL# 1/26/10		
15	0066680	PYXIS CONNECT BASE SYSTEM					
	27050	1	0	0	1 EA	20185.0000	
	27050801						
	10/26/09	MM MM	ORDER	1 @20185.0000			
16	0066681	PYXIS CONNECT ORDER STATION					
	27050	1	0	0	1 EA	10413.0000	
	27050801						
	10/26/09	MM MM	ORDER	1 @10413.0000			
17	0066682	PYXIS CONNECT SCAN STATION					
	27050	1	0	0	1 EA	11159.0000	
	27050801						
	10/26/09	MM MM	ORDER	1 @11159.0000			

Equipment paid on 02/05/10 (hi-lighted)	272,587.00 *
Equipment Open as of 03/31/10	86,344.00
Support paid on 02/15/10	759.00 *
Support paid on 02/26/10	759.00 *
Support Open as of 03/31/10	11,106.00

Total PO	371,555.00
Grant Award	(185,140.00)
NSHC Funded	186,415.00

Total Paid by 03/31/10	274,105.00 *
NSHC Funded	(186,415.00)
Grant Request for 03/31/10	87,690.00



## NORTON SOUND HEALTH CORPORATION

CHECK DATE 04/02/10

VENDOR NO. 0116627

OPERATING ACCOUNT

CHECK NO. 0291201

INVOICE NUMBER	DATE	DESCRIPTION	GROSS AMOUNT	DISCOUNT	NET PAID
1735073-7	03/04/10		\$759.00	\$0.00	\$759.00
			<b>TOTALS</b>	\$759.00	\$0.00
					\$759.00



## NORTON SOUND HEALTH CORPORATION

OPERATING ACCOUNT

P.O. BOX 966

NOME, AK 99762

 WELLS FARGO BANK ALASKA, N.A.  
 ANCHORAGE, ALASKA  
 9951252

CHECK NO. 0291201

 AMOUNT  
 \*\*\$759.00

DATE 04/02/10 VENDOR NO. 0116627

PAY SEVEN HUNDRED FIFTY NINE 00/100

 TO THE CAREFUSION SOLUTIONS, LLC  
 ORDER OF: PYXIS PRODUCTS-LOCKBOX #771952  
 1952 SOLUTIONS CENTER  
 CHICAGO, IL 60677-1009


## NORTON SOUND HEALTH CORPORATION

P.O. BOX 966

NOME, AK 99762

 CAREFUSION SOLUTIONS, LLC  
 PYXIS PRODUCTS-LOCKBOX #771952  
 1952 SOLUTIONS CENTER  
 CHICAGO, IL 60677-1009



# CareFusion

CareFusion Solutions, LLC / Pyxis® Products

Page 2

Invoice No.	1735073-7
Account No.	105380
Invoice Date	03/04/10
Due Date	04/01/10
Total Due	759.00

PLEASE CALL 1-800-438-6789 IF YOU HAVE ANY QUESTIONS

AREA: West

6059827-010	PO 053908	4Rx Console only	S/N 12971053	PHARMACY	215.00
		DUE 04/01/10 SYSTEM SUPPORT			-----
					215.00
					-----
					215.00

Location: PHARMACY

LOCATION: QCC

6059827-002	PO 053908	4000Aux 1col 0drwr	S/N 12968259	QCC	35.00
		DUE 04/01/10 SYSTEM SUPPORT			-----
					35.00

6059827-007	PO 053908	4RXMn6dr4PremBio	S/N 12970949	QCC	106.00
		DUE 04/01/10 SYSTEM SUPPORT			-----
					106.00
					-----
					141.00

Location: QCC

Totals By Location:

	TOTAL
CW105380	106.00
ER	141.00
INPT	156.00
PHARMACY	215.00
QCC	141.00
	-----
	759.00
	-----
TOTAL DUE THIS INVOICE	759.00